



MAR 19 2004

PTO/SB/22 (08-03)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket No. (Optional)
BPI-193

	In re Application of Subhashis BANERJEE et al.	
	Application Number 10/623035-Conf. #1410	Filed July 18, 2003
For: TREATMENT OF PAIN USING TNF α INHIBITORS		
Art Unit 1651	Examiner Not Yet Assigned	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- | | |
|--|-----------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$ _____ |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$ _____ |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$ 950.00 |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$ _____ |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$ _____ |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____ | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-0080 | |

I have enclosed a duplicate copy of this sheet.

I am the applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

attorney or agent of record. Registration Number _____

attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) 33,505

(Signature)

March 19, 2004

Date

(617) 227-7400

Telephone Number

Elizabeth A. Hanley

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

Total of 1 forms are submitted.

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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 377 649 965 US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: March 19, 2004

Signature: *(Signature)* (Elizabeth A. Hanley)